

Emergency appeal №: MDRCV005 Emergency appeal launched: 27/08/2025 Operational Strategy published: 12/09/2025	Glide №: XX-2014-123456-XXX
Operation update #2 Date of issue: 04/11/2025	Timeframe covered by this update: From 27/08/2025 to 15/10/2025
Operation timeframe: 12 months (23/08/2025 - 31/08/2026)	Number of people being assisted: 7,500
Funding requirements (CHF): CHF 2,5million through the IFRC Emergency Appeal CHF 3 million Federation-wide	DREF amount initially allocated: CHF 565,565

To date, this Emergency Appeal, which seeks CHF 3,000,000, is 45% per cent funded. Further funding contributions are needed to enable the National Societies in the region, with the support of the IFRC, to continue with the preparedness efforts of and provide humanitarian assistance and protection to people on the move.



CVCV Volunteers supporting distribution in Salamanca, São Vicente Island. Photo: CVCV

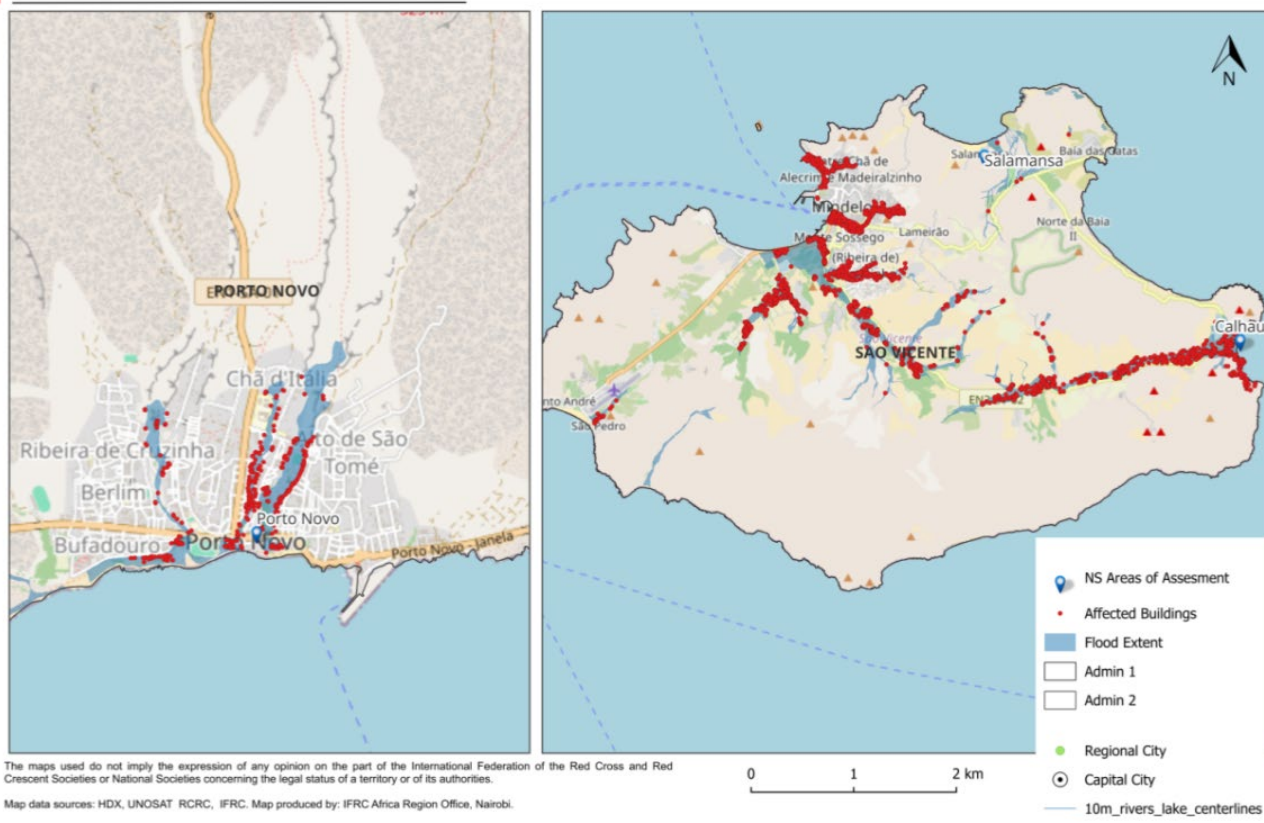
A. SITUATION ANALYSIS

Description of the crisis

On 10–11 August 2025, Tropical Storm Erin brought torrential rains that caused severe flash floods and landslides across Cabo Verde, with São Vicente and Santo Antão experiencing the most significant devastation and partial impacts in São Nicolau. In just a few hours, rainfall exceeded annual averages, overwhelming drainage systems, and leading to widespread destruction of homes, public infrastructure, and essential services. At least 12 people lost their lives; five went missing, and more than 27,500 people were directly affected, including 1,500 displaced in São Vicente. About 20,000 people have been injured¹. Over 2,500 buildings were damaged, five bridges collapsed, and more than 60 km of roads were cut off, isolating entire communities. Mindelo’s central hospital and several health centers were inundated, resulting in the destruction of vaccine stocks and interruption of critical health services. Water and sanitation systems collapsed, forcing reliance on emergency water trucking, while markets and food stocks were destroyed, disrupting livelihoods and increasing food insecurity.

The situation has heightened protection risks for vulnerable groups, including women, children, the elderly, and people with disabilities, who face displacement, loss of income, and reduced access to assistance. The compounding effects of the floods, combined with Cabo Verde’s existing vulnerabilities such as high food import dependency, recurrent droughts, and fragile health systems, have created a complex humanitarian emergency requiring sustained relief and early recovery efforts.

Exactly one month later, on 11 September 2025, new heavy rains struck São Vicente, causing additional localized flooding in Mindelo. However, since the previous report, the overall situation has stabilized and has not further deteriorated. Most roads and damaged public infrastructure have been cleared, and the majority of displaced families have returned home, yet 74 families are still residing in government-funded temporary accommodation. Affected communities have begun rebuilding and restoring their livelihoods, with the current focus shifting toward recovery and rehabilitation of the most impacted areas.



Flooded area in the islands of Santo Antão (left) and São Vicente (right). August 2025.

Summary of response

Overview of the host National Society and ongoing response

The Cruz Vermelha de Cabo Verde (CVCV) was founded in 1975 and officially recognized by the International Committee of the Red Cross (ICRC) on 14 March 1985. It became a member of the International Federation of Red Cross and Red Crescent Societies (IFRC) in the same year. Headquartered in Praia, CVCV operates through a network of 19 branches and 46 local units across all nine inhabited islands and 22 municipalities. The organization is supported by 134 staff and 2,185 volunteers², enabling it to have a significant reach and influence at national and local levels. CVCV serves as an auxiliary to the public authorities and has been at the forefront of the emergency response in disaster management.

On the onset of the crisis, CVCV has closely coordinated with the National Civil Protection Service, municipalities, and other government agencies, and rapidly mobilized local volunteers in São Vicente and Santo Antão to support evacuations, provide first aid, and conduct rapid needs assessments. Pre-positioned relief stocks were deployed from Praia to distribute essential household items, food parcels, and hygiene kits to affected populations, including the 900 people hosted in collective shelters. Water trucking operations have been implemented, ferrying approximately 150m³ of potable water daily from Santo Antão to São Vicente. The National Society continues to scale up distributions in severely affected communities while coordinating closely with government-led disaster response mechanisms.

As the main humanitarian actor in-country, CVCV, supported by the IFRC and other Movement partners, is leading a multi-sectoral response covering shelter, WASH, health, cash assistance, protection, and community engagement, while also participating in national and regional coordination platforms to ensure complementarity, avoid duplication, and strengthen collective impact.

During the reporting period, significant progress was made in responding to the needs of the most affected people in both Santo Antão and São Vicente.

Some of the key results between the start of the operation and 15 October are as follows:

- 940 people (238 families) have received Emergency Household items;
- 2,550 people (510 families) have received food assistance;
- 470 people have been reached through health and care;
- 8,461 people have been reached through WASH assistance (including hygiene promotion, repairs and disinfection, and distributions);

The interventions are coupled with capacity strengthening of the Cabo Verde Red Cross, and transversal Protection, Gender, and Inclusion, and Community Engagement and Accountability.



Distribution in Planalto Leste community, Santo Antão Island. Photo: CVCV

Needs analysis

The 10-11 August floods in São Vicente, Santo Antão and Sao Nicolau, Cabo Verde, have created urgent needs across multiple sectors.

- Two months after the crisis, food and non-food items (NFIs) remain critical, as thousands of families lost their homes and belongings. While most displaced households have left temporary shelters, the continued provision of these items is essential to support the most vulnerable in resuming normal life.
- At this stage, food security remains fragile due to damaged markets, destroyed food stocks, and limited access to isolated areas. The floods also disrupted livelihoods, destroying farmland, fishing equipment, and small businesses, leaving many families dependent on humanitarian assistance.
- Water, sanitation, and hygiene (WASH) needs are still severe. Collapsed water systems, reliance on unsafe water sources, and a lack of functional latrines and hygiene promotion activities heighten the risk of waterborne disease outbreaks.
- Health and psychosocial needs are still high, with inundated health facilities, lost vaccines, and limited mental health support. Protection, gender, and inclusion concerns are elevated, particularly for women, children, older persons, and people with disabilities, who face risks in hard-to-reach communities.

A multisectoral needs assessment of São Nicolau Island was completed during the third week of October, and its findings will be included in the upcoming Operations Update.

Operational risk assessment

Currently, there have been no significant changes in the operational context that would affect the anticipated risks for the ongoing emergency response operation in Cabo Verde. The situation remains stable, IFRC and CVCV teams continue to closely monitor developments to ensure preparedness and adapt operational strategies as needed. No new risks have been reported during the current period that could disrupt the implementation of planned activities. However, the ongoing rainy season, expected to continue through October, poses potential risks of renewed storms, landslides, and localized flooding, which could further damage infrastructure, displace additional populations, and delay recovery efforts. To mitigate these risks, CVCV is carefully scheduling key activities such as distributions of relief items, provision of multi-purpose cash and community mobilization to minimize the impacts that might arise from the rainy session.

B. OPERATIONAL STRATEGY


Update on the strategy

No major changes or amendments have been made beyond the edits to the targeting and modality of interventions presented on Operations Update 1. The current implementation is therefore proceeding as outlined, with no revisions to targets, outcomes, or key milestones required at this stage.

All changes to indicators and targets based on the strategy revision are also documented under each sector below.

C. DETAILED OPERATIONAL REPORT

STRATEGIC SECTORS OF INTERVENTION

 Shelter, Housing and Settlements	Female > 18: 2,573	Female < 18: 1,103
	Male > 18: 2,678	Male < 18: 1,148

Objective:	<i>Communities in disaster and crisis affected areas restore and strengthen their safety, wellbeing and longer-term recovery through shelter and settlement solutions</i>
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Key indicators:	Indicator	Actual	Target
	<i># targeted people receiving emergency shelter kits and EHI assistance</i>	1,190	4,600
	<i># of households receiving EHI</i>	238	920
	<i># of volunteers trained in emergency shelter</i>	0	10
	<i># of households receiving emergency shelter kits</i>	0	920

Until 15 October, Cruz Vermelha de Cabo Verde (CVCV) reached 238 households (about 1,190 people) in São Vicente with essential household items. Assistance was provided to 110 households in Iraque, 50 households in Rozar, 45 households in Norte Baía, 24 households in Salamansa, and 9 households in Colhau, including kitchen sets, blankets, mats, buckets, jerrycans, tarpaulins, and candles to address their immediate needs and support the restoration of stability and dignity.

During the reporting period, significant progress was made on the procurement of shelter kits and emergency household items, mobilization of volunteers, and registration of communities in both Santo Antão and São Vicente. Distributions of EHI and shelter kits accomplished on the 3rd and 4th weeks of October, targeting in total 178 families in the communities of Espía and Salamansa (São Vicente), and Planalto Leste (Santo Antão), and the multisectoral assessment in the island of São Nicolau (24-27 October) will be reported on the following Operations Update, to respect the Appeals reporting timeline.

The operation is ongoing and aims to reach a total of 920 households (around 4,600 people) with kind relief assistance.

Post Distribution Monitoring (PDM) is planned for the upcoming weeks.



Livelihoods

Female > 18:

Female < 18:

Male > 18:

Male < 18:

Objective:

Communities, especially in disaster and crisis affected areas, restore and strengthen their livelihoods

Key indicators:	Indicator	Actual	Target
	# of households receiving food assistance	510	920
	# of households receiving assistance to support their livelihoods	0	920
	# volunteers trained and deployed for identification, distribution and monitoring of support	41	30
	% of beneficiaries that are satisfied with assistance given	0	2

The August floods significantly worsened food insecurity in the affected areas, as markets, food stocks, and supply chains were damaged, limiting access to essential goods. In solidarity, local communities and Cabo Verdeans living abroad made food donations to Cruz Vermelha de Cabo Verde (CVCV) to support the most affected. During the reporting period, CVCV distributed food parcels from local donations to 510 households (about 2,550 people) across 8 communities in the Island of São Vicente - namely the communities of Iraque, Norte de Baía, Salamansa, Aldeameanto Rozar, Lazareto, Calhau, and Craquinha and Madeirinha. The composition of the delivered food baskets varied, so the same communities should be targeted under cash program and other distributions to complement the support.

Furthermore, between September and October, 41 CVCV volunteers from both São Vicente and Santo Antão branches were trained in the use of Kobo Toolbox for household registration and needs assessment. Following the training, the volunteers conducted door-to-door interviews to assess the needs of people in 13 communities, registering 153 people for the receipt of assistance.

Location	Registered people
Bela Vista	16
Calhau	9
Fernando Pó	3
Fonte Felipe	1
Fonte Francês	21
Monte / Campim / Dji d'Sal	1
Monte Sossego	7
Passarão	1
Ribeira Bote	1
Ribeirinha	57
Salamansa	36

Some of the registered communities were subsequently targeted in three distributions in the 3rd and 4th weeks of October, which targeted over 178 families. These will be accounted for in the next Operations Update, in respect

of the Appeal's reporting timeframe. Assessment and registration are also underway for the families to receive livelihoods support under the Cash program – including considerations from the multisectoral assessment in São Nicolau, on the 3rd week of October.

Post Distribution Monitoring (PDM) is planned for the upcoming months.


Indicator revision:

The following indicator was reviewed to improve quality measurement within the program:

"# of Post distribution monitoring (PDM) reports produced" was replaced with "% of beneficiaries that are satisfied with the assistance given".



Volunteers' training in Porto Novo, Santo Antão.

	Multi-purpose Cash	Female > 18:	Female < 18:
		Male > 18:	Male < 18:
Objective:	<i>Households are provided with unconditional/multipurpose cash grants to address their basic needs</i>		
Key indicators:	Indicator	Actual	Target
	<i># Targeted people with Multi-purpose Cash assistance</i>	0	6,900
	<i># of volunteers trained in Multi-purpose Cash Assistance</i>	0	50
	<i># of HHs receiving cash</i>	0	580
	<i>% of beneficiaries that are satisfied with assistance given</i>	0	70%

Preliminary market observations were conducted in Mindelo – São Vicente Island, confirming that local markets are functional, accessible, and sufficiently stocked with essential goods. Building on these findings, a market assessment was carried out in Mindelo to better understand the functionality of local markets and their capacity to meet the basic needs of the affected population – interviews with merchants are in progress. Market assessments are also planned for the islands of Santo Antão and São Nicolau, with an adapted focus on understanding the impact of the floods on livelihoods of the affected communities. In parallel, coordination meetings with Caritas and SOS Children’s Village (Aldeias Infantis) key actors are ongoing to agree on a harmonized transfer value to cover basic needs.

A CVA training is planned as part of broader capacity-building efforts to CVCV. Basic CVA modules are being adapted, while Cash in Emergencies (CiE) tools for assessment and response analysis are being translated and contextualized. The trained staff and volunteers and adapted tools will serve as key resources for future National Society CVA interventions.

A Post Distribution Monitoring questionnaire for the cash program and exit interview were developed, and are under team review, to be conducted after the delivery of the assistance.

Indicator revision:

The following indicator was reviewed to improve quality measurement within the program: “# of Post distribution monitoring (PDM) reports produced” was replaced with “% of beneficiaries that are satisfied with the assistance given”.



Volunteer interviewing communities in Ribeira Brava - São Nicolau. Photo: IFRC.



Health & Care

(Mental Health and psychosocial support / Community Health / Medical Services)

Female > 18:

Female < 18:

Male > 18:

Male < 18:

Objective:

Strengthening holistic individual and community health of the population impacted through community level interventions and health system strengthening

Key indicators:	Indicator	Actual	Target
		<i># of people reached through MHPSS, medical service, health promotion and disease prevention</i>	470
	<i># of mobile clinics established</i>	1	3
	<i># of MHPSS community sessions and community-based awareness sessions (incl. RCCE)</i>	0	20
	<i># of mosquito nets distributed</i>	0	1,840
	<i># of volunteers trained in Health and Care (community awareness and first aid)</i>	60	50
	<i># of training sessions delivered to volunteers and community representatives (incl. Health EPaRT, and first Aid)</i>	4	10
	<i># of people reached through MHPSS activities</i>	104	2,000

To date, 470 people have been reached through Health and Care interventions, including mental health and psychological (MHPSS) support, medical services, and community health promotion activities. In view of the needs of families in shelters, since the onset of the crisis group therapy and one-on-one counselling sessions are being delivered to affected people in Iraque, Monte Sossego, Salamansa and Norte Baía. These sessions have taken place in shelters, schools, and other strategic locations identified by community leaders. In collaboration with local health units and NGOs, CVCV is also conducting community mobilization sessions across communities in both São Vicente and Santo Antão islands, aimed at promoting health and raising awareness. During the reporting period, these activities have reached 470 individuals, including schoolchildren. As part of the medical services, children receive pediatric screenings, and those requiring additional assistance are referred to hospitals for specialized care.

The National Society has conducted four training sessions focused on first aid in emergency and psychological first aid. A total of 60 volunteers (28 male and 32 female) were trained in emergency first aid, and 29 of them also received additional training in psychological first aid. On October 15, the World Handwashing Day was celebrated with an open discussion held in the Dji D'Sal community, São Vicente Island. On the occasion, a total of 27 people were reached, and a door-to-door campaign covered 53 households. To date, one rented mobile clinic is functioning, with equipment and supplies being funded under this operation. The current strategy proposes to expand the health activities with two other mobile clinics upon availability of funds.

The distribution of mosquito nets to 178 families, and three community sessions respectively in São Vicente and Santo Antão islands were accomplished on the third and fourth weeks of October. These will be accounted for in the next Operations Update, in respect of the Appeal's reporting timeframe.

Indicator revision:

For simplification and cohesion “# of people reached through Health & Care (incl. MHPSS and medical services)”, was merged with “# of people reached through health promotion and disease prevention”.



CVCV Volunteers on health promotion activity, in São Vicente. Photo: CVCV



Water, Sanitation and Hygiene

Female > 18:

Female < 18:

Male > 18:

Male < 18:

Objective:

Ensure safe drinking water, proper sanitation, and adequate hygiene awareness of the communities during relief and recovery phases of the Emergency Operation, through community and organizational interventions

Key indicators:

Indicator

Actual

Target

of people reached through WASH assistance

8,461

40,000

of households in need receive hygiene kits

238

920

of households reached with dignity kits

0

920

of community-based hygiene promotion sessions conducted

45

40

of people educated on key hygiene and sanitation practices

8,461

4,000

of volunteers trained in WASH

65

50

of sanitation facilities improved

77

10

of people reached through water and hygiene promotion (radio, social media, etc.)

0

40,000

# of water points rehabilitated or constructed to improve access to drinking water	0	10
% of beneficiaries that are satisfied with the assistance given	0	70

As part of the response phase, Cruz Vermelha de Cabo Verde (CVCV) is delivering a comprehensive WASH intervention to support communities affected by the recent flooding. The response is largely supported by the deployment of three ERUs - the Household Water Treatment and Safe Storage (HWTS ERU), the Mass Sanitation Module (MSM 20 ERU), and the Water Supply Rehabilitation (WSR ERU), with a Rapid Response WASH Coordinator.

During the reporting period, 8,461 people had been reached through WASH assistance, including education, health promotion, disinfection, and rehabilitation activities in schools and communities, and distributions of hygiene items, jerrycans and buckets. Of this number, 1,185 individuals (237 households) have benefited from hygiene kits (table 1), 110HH in Mindelo, 50HH in Rozar, 45HH in Norte Baía, 24HH in Salamansa and 8HH in Calhau. Additionally, jerrycans were distributed to 45HH in Norte de Baía, enabling safe collection, transport, and storage of water by affected populations.

Composition of the hygiene kits	
Items	Quantity
Washing powder	1 kg
Body soap	125 g
Toothpaste	100 ml/ 125 g
Toothbrush	Pack of 5 pcs
Shampoo	500 ml
Disposable razor	Pack of 5 pcs
Hygiene pads	Pack of 20 pcs
Toilet paper	Pack of 4 rolls
Body towel	140 x 70 cm
Hand towel	90 x 50 cm

Table 1: Breakdown of hygiene kit items.

Through hygiene promotion activities focusing on handwashing practices, kitchen cleanliness, waste management, and vector control, the National Society has reached 8,461 people, including school children, teachers, and community leaders. This intervention utilizes mainly focus group discussions with community members at local schools, including specific interventions for school children and the dissemination of flyers and posters. To encourage good hygiene practices among them, 200 bars of soap were distributed across three schools in Mindelo.

On September 21, a WASH training was delivered to 55 volunteers (35 females and 20 males) in Mindelo, including fundamentals of menstrual hygiene. Information, Education, and Communication (IEC) materials containing key messages on personal hygiene and sanitation were reviewed and validated by the National Institute of Public Health of Cape Verde. All materials required for the hygiene promotion campaign, including posters, T-shirts, bottles, bags, and brochures, have been produced, and are being used as part of the hygiene promotion campaign.

On October 13, another three-hour training session was held for 14 volunteers, focusing on community hygiene promotion techniques covering topics such as household water treatment, menstrual hygiene, handwashing, kitchen cleaning, waste management, vector control and open defecation managing. The training incorporated several participatory hygiene activities, including the three-pile sorting cards, the T-diagram, and community mapping, presenting volunteers with diverse tools and approaches to facilitate community hygiene awareness.

During the reporting period, 35 municipal water tanks and sanitation facilities in 34 schools were inspected, aiming at guiding future improvements. The table below lists all facilities repaired by the WASH team during the reporting period.

Repaired Facilities:	
Children toilets	49
Teacher's toilets	16
Accessible toilets	4
Sink	68
New Deposits	2
Kitchens	10
Sanitation	2
Installed menstrual hygiene showers	4

On Santo Antão Island, two assessments were undertaken to evaluate sanitation conditions and water sources damaged by floods, which have disrupted access to safe water for approximately 200 families in the northwest of the island. The results were shared with the Water and Sanitation Councilor of Porto Novo Municipality on Santo Antão Island to inform and coordinate targeted interventions. Throughout the response, CVCV has also maintained close coordination with local authorities and key stakeholders to ensure alignment and complementarity of interventions in Sao Vicente. The WASH team held meetings with the Public Water Company in São Vicente and the Water and Sanitation Councilor of São Vicente Municipality to present and discuss operation priorities.

Significant progress was made in the accomplishment of WASH activities during the 3rd and 4th weeks of October, including the distribution of hygiene kits to 203 families (1015 people), 7 community sessions, repair and disinfection work, targeted training for teachers, and agreement with a radio for dissemination messages. However, in respect of the appeal reporting timeline, these will be reported on the upcoming update.

The following indicator was reviewed to improve quality measurement within the operation:

“# of Post distribution monitoring (PDM) reports produced” was replaced with “% of beneficiaries that are satisfied with the assistance given”.



Disinfection activity carried out in São Vicente.



Protection, Gender and Inclusion

Female > 18:

Female < 18:

Male > 18:

Male < 18:

Objective:

Communities identify the needs of the most at risk and particularly disadvantaged and marginalized groups, due to inequality, discrimination and other non-respect of their human rights and address their distinct needs

Key indicators:

Indicator	Actual	Target
<i># of individuals reached through information, awareness activities and cross-sectoral guidance on PGI, SGBV, CFS, MHM, child protection and safeguarding</i>	2,966	2,000
<i># of awareness flyers produced and distributed</i>	1	500
<i># volunteers trained on PGI, PSEA, SGBV, DAPS, CFS, and/or child safeguarding</i>	79	50
<i># PGI and CSRA recommendations implemented throughout the operation</i>	6	6
<i># of Child-Friendly Spaces (CFS) implemented</i>	2	2
<i># of community sensitization sessions conducted on PGI, SGBV, HMH and child protection</i>	0	20

# Number of safe referral mechanisms for SGBV and child protection	0	2
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Since the onset of the operation, PGI activities have been mainstreamed with the presence of a PGI Focal Point from Praia, deployed to the operation, and a Rapid Response PGI Coordinator, for three months.

With the aim of ensuring a sensitive and inclusive response focused on the specific needs of women and children, two reception centers were established at the beginning of the response. One space at Escola de Monte Sossego operated until 26 September, serving 28 children and adolescents before their relocation, and another one at the Centro de Estágio, providing a safe and welcoming environment where children can participate in art and discussion activities, restore a sense of normality, and develop resilience skills.

Progress has been done on strengthening the capacity of all staff and volunteers: between 19 and 25 September, CVCV conducted three PGI trainings for over 79 volunteers - 45 female and 34 male - focusing on hygiene promotion and menstrual hygiene (55 volunteers), and psychosocial support, and safe field practices (24 volunteers). One additional training took place in early October, focusing on menstrual hygiene, for 14 volunteers (11 female, 3 male). In parallel, the National Society and PGI Coordinator finalized a checklist of existing PGI capacities, compiled context-specific PGI information, and drafted standard PGI guidelines for distributions and dignity kits. These activities strengthen the National Society's capacity to deliver inclusive, safe, and dignified assistance to affected communities.

Building on these trainings, the PGI team, in coordination with the Education and WASH sectors, reached 82 prioritized individuals in Iraque and Norte de Baía with awareness and support activities, applying PGI minimum standards, safe spaces, differential access, and psychosocial support. During these activities, 131 people who lost documentation during the floods were registered and referred to local authorities for support in producing new documents. Furthermore, an institutional meeting with the Education Delegation was held to integrate PGI into prioritized schools, including referrals of children lacking documentation, assessment of school kit needs, and planning training for education staff. A meeting with FICASE, a government organization that distributes school kits in public schools, was held with the aim of assessing needs and capacities and understanding how to collaborate through donations of school supplies.

An assessment in 24 flood-affected schools was conducted, using key PGI and questions to assess the impact of floods on child protection, access to school material, and the level of staff training in PGI, psychosocial support, and safeguarding. These activities reached teachers and school directors, strengthening knowledge and application of PGI minimum standards, while coordination with the WASH team ensured integration of PGI standards into distributions, school rehabilitations, and hygiene promotion activities, supporting a safe, inclusive, and protective response for affected communities. Indeed, renovation works have been completed to date in 10 schools on the island, including the installation of doors in all toilets, renovation of lighting systems, inclusion of lockers, hygienic showers, and installation of ramps to ensure accessibility. In addition, 4 hygienic showers were installed in 2 schools. These works directly benefited 2,914 students.

During October, the PGI team implemented a GBV questionnaire during field activities, with the objective of assessing community needs related to gender-based violence (GBV), identifying ways to integrate a holistic response across all relevant sectors, and developing a safe referral mechanism for potential victims and survivors.

Significant progress on PGI activities was done on the 3rd and 4th weeks of October, when 136 women and girls were reached with menstrual hygiene kits and 3 menstrual hygiene awareness sessions in São Vicente and Santo Antão. A communication guide was prepared for community leaders on dignity kits, menstrual hygiene and SGBV, as well as an information leaflet aimed at women and adolescents' girls for distribution during awareness-raising sessions and distributions. In respect of the Emergency Appeal reporting timeframe, these activities will be accounted for on the next Operations Update.

Indicator revision

The following indicators have been rephrased to align with the ongoing activities:

of individuals reached through information, awareness activities and cross-sectoral guidance on PGI, SGBV, CFS, MHM, child protection and safeguarding

of CSRA accomplished and followed by recommendations - Target: 1

of PGI and CSRA recommendations implemented throughout the operation

of safe referral mechanisms for SGBV and child protection. – Target: 2



Community Engagement and Accountability

Objective:			
Key indicators:	Indicator	Actual	Target
	<i># of households informed about assistance, selection criteria and schedule</i>	510	1,500
	<i># of volunteers trained in CEA</i>	60	50
	<i># of functional feedback and information-sharing channels established</i>	0	2
	<i># of participatory planning meetings, FGDs, or committees held with diverse representation (women, youth, people with disabilities, and minority groups)</i>	6	10

Cabo Verde Red Cross, through its Community Engagement and Accountability (CEA) approach, ensures that affected communities are informed and actively involved in the response. The deployment of a *Rapid Response* CEA Coordinator by IFRC is reinforcing the technical capacity of the CVCV teams and ensuring that accountability and community participation are systematically integrated across all activities.

Since the onset of the operation, the CVCV CEA team has focused on building trust, facilitating two-way communication, and establishing feedback mechanisms to ensure assistance remains relevant, inclusive, and responsive to people's priorities. Following identification of beneficiaries and assessment in communities, 510 assisted households have been informed about the assistance and selection criteria, and distribution schedule to ensure transparency and allow families to plan for the interventions, confirm their participation and provide any necessary updates or clarifications.

Close collaboration with local leaders, Civil Protection, and sectoral partners has also been in place since the beginning of the operation. The CEA team conducted participatory planning meetings, key informant interviews, and household-level consultations across affected communities in Pedra Rolada, Cabo d'Rbera, Zona Verde (Espia), Dbox Jon d'Ebra, Portelinha / Ribeira da Craquinha, Covada da Bruxa, and Bela Vista, ensuring the inclusion of women, youth, people with disabilities, and minority groups. These activities help identify urgent needs, map the most affected households, and inform targeting strategies, ensuring that response efforts are inclusive, transparent, and aligned with community priorities.

To strengthen these efforts, during the reporting period, four structured trainings on CEA in Emergencies and Minimum CEA Actions (two in São Vicente and two in Santo Antão) were delivered to over 60 volunteers and branch staff, including combined sessions on Communication Skills, Code of Conduct, and PSEA with PGI and WASH teams. The trainings covered topics such as how to conduct needs assessments, use Kobo questionnaires, and engagement of communities in a respectful and effective manner. The training integrated a role-play simulation to replicate real-life scenarios, which proved highly valuable during field implementation.

To support frontline teams, the team also produced localized versions of volunteer materials, such as a basic Q&A sheet to be used during community interventions and distributions, one community feedback form, banners, and visibility templates with the CVCV logo – essential to ensure that volunteers deliver clear and consistent messages during distributions.

During the reporting period, the team has developed and piloted community feedback form and has analyzed the first 28 community feedback through paper and Excel forms, producing a first Community Feedback Report, shared internally. Work is in progress to establish a sustainable Community Feedback Mechanism (CFM) including workflow, data entry, analysis, and closing the feedback loop, to institutionalize CEA within CVCV systems and identify trained focal points to maintain mentoring.



Household-level consultations in São Vicente. Photo: CVCV

Enabling approaches



National Society Strengthening

Objective:			
Key indicators:	Indicator	Actual	Target
	<i># of CVCV staff member dedicated to DREF implementation</i>	1	1
	<i># of visibility materials produced and distributed to staff and volunteers</i>	80	150
	<i># of branches supported</i>	1	3
	<i># of volunteers covered and insured</i>	150	150
	<i># of system improved (warehouse management, finance system, CVA)</i>	0	3

The director of the Disaster Management Department has been appointed by the National Society as the DREF focal point, providing overall coordination and oversight of the operation. To enhance visibility, the National Society procured 100 bibs and 100 T-shirts for volunteers, of which 80 bibs and 50 T-shirts have already been distributed.

Significant progress has been made in strengthening the capacity of the São Vicente branch, with efforts focused on building the skills of staff and volunteers to improve coordination and operational performance. For instance, over 70 volunteers and staff have received training in CEA, PGI, WASH, Health, as well as Security and Protection.

In line with the DREF plan, 150 CVCV volunteers and staff are insured, ensuring compliance with IFRC standards and reinforcing the National Society's commitment to the safety and well-being of its personnel. At the same time, the National Society is strengthening key support functions, particularly warehouse management and cash transfer services, with appointed staff receiving technical guidance and on-the-job coaching from IFRC delegates to ensure effective implementation.

Significant progress was made on the third week of October, on the occasion of the "Day of the Volunteer", which gathered branch representatives from all over the country. These outcomes will be reported on the upcoming Operations Update, in respect of the Appeal's reporting timeline.



Coordination and Partnerships

Objective:			
Key indicators:	Indicator	Actual	Target
	<i># of technical workshops, including lessons learned, organized</i>	0	3
	<i># of membership coordination meetings held (strategic, operational, and technical), with minutes documented and shared.</i>	0	5
	<i># of external coordination meetings attended with the National Society, the authorities and external actors for this response (inter-agency, government, movement)</i>	5	6

Since the beginning of the operation, the National Society has been continuously coordinating with external partners. Five coordination meetings were held with external actors, including government authorities and non-governmental agencies. These efforts have strengthened collaboration, aligned response activities, and ensured that assistance reaches affected communities efficiently and effectively. CVCV also holds weekly coordination meetings with the IFRC Country Cluster Delegation in Dakar to discuss strategic, operational, and technical matters, ensuring alignment and informed decision-making throughout the response.



Secretariat Services

Objective:			
Key indicators:	Indicator	Actual	Target
	<i># of updated minimum security requirements</i>	1	1
	<i># technical support missions carried, and recommendations implemented</i>	5	6
	<i># of communication products published and shared</i>	0	4

The IFRC Dakar Cluster for Senegal, Mauritania, The Gambia, and Cabo Verde has been providing direct support to Cruz Vermelha de Cabo Verde (CVCV) since the onset of the floods in the country. Technical and operational assistance has been delivered through the deployment of two finance officers, two operations managers, and a logistics officer to support CVCV in implementing activities as planned under the Emergency Appeal. The IFRC Dakar Cluster Head of Delegation also traveled to Cabo Verde in August to provide in-country support.

To further enhance CVCV's capacity, the IFRC has deployed several surge and technical personnel to provide targeted technical support across key areas of the operation:

- Operations Manager supports the design, implementation, monitoring, and reporting of activities in line with Emergency Appeal objectives, defining operational strategies, and integrating early recovery approaches to build community resilience.
- CVA Coordinator ensures that cash and voucher assistance (CVA)-related data is collected during assessments, providing technical support, and overseeing CVA implementation to ensure compliance with standards and effective monitoring.
- The CEA Coordinator strengthens the National Society's capacity in community engagement and accountability, ensuring the response is guided by community priorities, feedback, and needs.
- PGI Coordinator ensures the integration of protection, gender, and inclusion across the response, while safeguarding vulnerable groups.
- PMER Coordinator supports the National Society in maintaining a Federation-wide approach to planning, implementation, monitoring, and reporting, in line with IFRC standards.
- WASH Coordinator oversees overall implementation of WASH operational strategy.
- Finance and Logistics Personnel provides essential financial and logistical support to enable timely and effective delivery of the response.
- Security Rapid Response Surge strengthens the National Society's capacity and ensures the safety of personnel involved in the operation.

Additionally, three Emergency Response Units (ERUs), namely the ERU Household Water Treatment and Supply (HWTS), ERU MSM20, and ERU Water and Sanitation Response (WSR), have been deployed to conduct assessments and support the implementation of response activities on the ground.

D. FUNDING

As of the latest update, this ongoing emergency appeal has received contributions from the following partners:

Hard pledges:	CHF 928,789
Soft pledges:	CHF 430,117

Contact information

- For further information, specifically related to this operation please contact:

In the CVCV National Society

- **Secretary General:** Salomão Sanches Furtado, email: salomao.furtado@cruzvermelha.org.cv, phone: +238 993 83 94
- **Operational coordination:** Abdoul Wahabou, email: abdoul.wahabou@cruzvermelha.org.cv, phone: +238 997 5477

In the IFRC

- **IFRC Regional Head of Health and Disaster, Climate and Crisis Unit:** Matthew Croucher; email: matthew.croucher@ifrc.org
- **IFRC Lead, Preparedness & Response; Health and Disaster, Climate, and Crisis Unit:** Rui Oliveira, email: rui.oliveira@ifrc.org
- **IFRC Head of Country Cluster Delegation:** Alexandre Claudon de Vernisy; email: alexandre.claudon@ifrc.org,
- **IFRC Cabo Verde: Operations Manager: Julio Mondlane;** email: Julio.mondlane@ifrc.org
- **IFRC Geneva: Santiago Luengo, Senior Officer Operations Coordination;** email: santiago.luengo@ifrc.org.

For IFRC Resource Mobilization and Pledges support:

- **IFRC Head of Regional Strategic Engagement and Partnerships:** Louise Daintrey-Hall; email: louise.daintrey@ifrc.org

For In-Kind donations and Mobilization table support:

- **IFRC Regional GHS & SCM Unit: Allan Kilaka Masavah, Head of Africa Regional Logistics Unit;** email: allan.masavah@ifrc.org

Reference documents



Click here for:

- [Previous Appeals and updates](#)
- [Operational Strategy](#)

How we work

All IFRC assistance seeks to adhere the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief, the **Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere)** in delivering assistance to the most vulnerable, to **Principles of Humanitarian Action** and **IFRC policies and procedures**. The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.